

a) determining a nucleotide sequence of exons 2-11 of a cancer-related p53 nucleic acid derived from a human neoplastic tissue or body fluid;

b) analyzing the nucleotide sequence determined in step a) for the presence of mutations; and

c) classifying the neoplasia into different subgroups depending on

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Cont (i) the presence or absence of a mutation, and

(ii) whether the patient is node positive or not; and

d) prognosticating the development of the neoplasia by combining the results of steps c)(i) and c)(ii) wherein said results are indicative of patient survival and providing guidance for the treatment of the patient.

I² 3. (Three Times Amended) The method of claim 2, further comprising determining the presence, position, and type of mutation and categorizing biological aggressiveness and/or metastatic potential of the neoplasia based upon the presence, position, and type of mutation,

wherein said neoplasia is breast cancer,

and wherein a mutation in a conserved region II and V of p53 is indicative of poor patient outcome whereas a mutation in

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cont a conserved region III and IV is indicative of positive patient outcome.

14. (Four Times Amended) A method for prognostication of the development of neoplasia in a human patient having a neoplasia comprising:

a) determining the nucleotide sequence of exons 2-11 of a cancer-related p53 nucleic acid derived from a human neoplastic tissue or body fluid;

b) analyzing the nucleotide sequence determined in step a) for the presence of mutations; and

I³ c) classifying the neoplasia into different subgroups depending on

(i) the presence or absence of a mutation, and

(ii) whether the patient is node positive or not; and

d) prognosticating the development of the neoplasia by combining the results of steps c)(i) and c)(ii), wherein said results are indicative of patient survival.

15. (Four Times Amended) A method for prognostication of the development of neoplasia in a human patient having a neoplasia comprising:

a) determining the nucleotide sequence of exons 2-11 of a cancer-related p53 nucleic acid derived from a human neoplastic tissue or body fluid;

b) analyzing the entire nucleotide sequence determined in step a) for the presence of mutations; and

c) classifying the neoplasia into different subgroups depending on the presence or absence of a mutation; and

d) prognosticating the development of the neoplasia by analyzing the results of step c) only, wherein said results are indicative of patient survival.
